

**IMPORTANT NOTICE: A \$25 (NON-REFUNDABLE) FILING FEE MUST
ACCOMPANY THIS APPEAL, WITHIN 30 DAYS OF ASSESSED CHARGES.**

Checks should be made payable to: City of Milwaukee

**IF THE CHARGES HAVE ALREADY APPEARED ON YOUR TAX BILL, THIS APPEAL
CANNOT BE FILED**

**PLEASE READ CAREFULLY: This Board may only determine if the City Department
followed proper administrative procedures. It cannot hear appeals as to whether a Building
Order is valid or not (those must be appealed to the Standards and Appeals Commission)**

TO: Administrative Review Appeals Board
City Hall, Rm. 205
200 E. Wells St.
Milwaukee, WI 53202
414-286-2231

DATE: _____

RE: _____ (Address of property in question)

Pursuant to Chapter 68 of the Wisconsin Statutes and Section 320-11 of the Milwaukee Code of Ordinances, this is a written petition for appeal and hearing.

I am appealing the administrative procedure followed by _____
(Name of City Department)

Amount of the charges \$ _____

Charge relative to: _____

**I feel the City's procedure was improper due to the following reasons and I have attached any
supporting evidence, including city employee's names/dates which I spoke to regarding this issue and
copies of any city orders received:**

(Your signature)

(Your name – please print)

(Your mailing address, zip code AND DAYTIME PHONE NUMBER)